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						(Depositor's name
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APPLICATION NO.	FILING DATE				ATTORNEY DOCKET N	
10/574,790	01/29/2007	9/2007 Vesa Laakso		n	43289-230079	6502
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nonprovisional	no	\$1,510.00		\$300.00	\$1,810.00	10/07/2011
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Correspondence X "Fee Address" i form PTO/SB4* Use of a Custor 3. ASSIGNEE NAME PLEASE NOTE: Unl for recordation as set (A) NAME OF ASSIG UPM Raflatac Oy	respondence address for Address form PTO/SBU. Address form PTO/SBU. 7, Rev 03-02 or more roce ner Number is required. AND RESIDENCE DATA cess an assignee is identification in 7 CFR 3.11. Cor NEE te assignee category or category.	Change of (22) attached. (2) s" Indication int) attached. (2) a 1 up nau A TO BE PRINTEI id below, no assign ppletion of this form	omeys or agents C in the name of a sin use gistered attorney to 2 registered pa me is listed, no name is listed, no name of ONTHE PATE and DONTHE PATE and DONTHE PATE are data will appear is NOT a substition (B) RESID Tamper and on the potent): 4b. Payment	gle firm (having as or agent) and the ient attorneys or a ne will be printed. NT (print or type) r on the patent. If tute for filling an a ENCE: (CITY and e, Finland Individual	a member 2 Enic J. F earness of 3 an assignee is identified bele ssignment. STATE OR COUNTRY)	wa, the document has been filed
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